

APPLICATION DATA SHEET**Application Information**

Application number::
Filing Date:: 10/31/03
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD disks::
Number of copies of CDs::
Sequence submission?:: No
Computer Readable Form (CRF)?::
Number of copies of CRF::
Title :: TREATMENT OF HYPERKINETIC MOVEMENT
DISORDER WITH DONEPEZIL
Attorney Docket Number:: 49321-103
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets::
Small Entity?:: Yes
Petition included?:: No
Petition Type::
Licensed U.S. Gov't Agency:: No
Contract or Grant No::
Secrecy Order in Parent Appl.?:: No

First Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Canada
Status::	Full Capacity
Given Name::	Kathryn
Middle Name::	
Family Name::	Chung
Name Suffix::	
City of Residence::	Lake Oswego
State or Province of Residence::	OR
Country of Residence::	US
Street of mailing address::	5541 Yorkshire Place
City of mailing address::	Lake Oswego
State or Province of mailing address::	OR
Country of mailing address::	US
Postal or Zip Code of mailing address::	97035

Second Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Steven
Middle Name::	
Family Name::	Johnson
Name Suffix::	
City of Residence::	Portland
State or Province of Residence::	OR

Country of Residence:: US
 Street of mailing address:: 2721 SW Montgomery Drive
 City of mailing address:: Portland
 State or Province of mailing address:: OR
 Country of mailing address:: US
 Postal or Zip Code of mailing address:: 97201

Correspondence Information

Correspondence Customer Number:: **22504**

Representative Information

Representative Customer Number::		22504
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Domestic Priority Information

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An application claiming the benefit under 35 USC § 119(e)	60/422,930	11/01/02

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name::	
Street of mailing address::	
City of mailing address::	
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	